

## WEST VIRGINIA SECRETARY OF STATE ELECTRONIC FILING OF RULES AUTHORIZATION FORM

Date Submitted \_\_\_\_\_ Date Approved \_\_\_\_\_

Agency	, Board or Commission Name _				
Address			Phone		
•	rpose of this form is to establis ures on-file, as required by statu		~		
There a	are four levels of access to the E	ERFS: 1) Review, Edit, Print	; 2) Fiscal; 3) Submiss	sion; 4) All.	
1)	) The following individual within my entity is granted permission to access, review, retrieve, edit and print our existing Rules.				
2)					
3)	The following individual within my entity is granted permission to file (submit) rules electronically. §5F-2-2(12) and (13) cites that by affixing my signature to this form, I am granting written consent to the individual listed below, the authority to electronically file Rules on my behalf.				
Printed	d Name	E-mail Address of I		Level of Access	
Title Numbers			nbers		
Any ch	anges in staffing will require a r	new form to be completed	prior to permissions	being granted.	
Agency Authorized Signature		Title			
	of C				
Signed	or attested before me on	{date} by		{name(s) of	
_	ual(s) making statement}	• • •		• • •	
marriadally making statements			Place Notary Stamp Here		
				,	
	{Signature	e of Notary Public}			
My cor	nmission expires:				

Return form to: West Virginia Secretary of State, Administrative Law Division, 1900 Kanawha Boulevard, East, Building 1, Suite 157-K, Charleston, WV 25305.